



Latex Allergy

BY GENEVIÈVE M. CLAVREUL, RN, PHD

AS NURSES, WE ARE CONFRONTED with the many health challenges of our patients, and one of the most common is an allergy. Luckily, most allergies only present us with simple annoyances; however, there are a few that can be serious—latex is just such an allergy. Like an allergy to peanuts, you do not need direct exposure to have an allergic response. Being touched by the hand that had been previously gloved with latex can elicit an unpleasant, even life-threatening response.

Sure, all nurses know to ask their patients about allergies, it's second nature. But beyond patient care, what about those of us working in the healthcare field who are constantly exposed to latex gloves? I am one of the many people allergic to latex; my physician and I concluded that like so many in

our chosen profession, I probably developed the allergy in response to prolonged use. This is a very real threat to nurses and other healthcare professionals. The American Academy of Family Physicians estimated that approximately 25 percent of all healthcare workers with hay fever symptoms show signs of actually being latex sensitized.

A recent experience provided the impetus to address this issue in my column. I hope that the next time a fellow nurse "gloves up," he or she will remember this article and think twice.

Just the other day, I was participating in a doctor-ordered stress test at a local hospital outpatient clinic, and as the technician began his ritual to prepare me for the test, he reached for the latex glove box. I quickly announced that I

On one assignment, I had to bring a doctor's note validating my allergy in order for the facility to order non-latex gloves.

was allergic to latex, but he continued to pull out a glove and put it on. I warned him a second time that I was allergic. At this point he acknowledged my comments, and removed his glove, opened an upper cabinet, and reached for the box of non-latex gloves, opened it and put one on.

Now fellow readers, what is wrong with this picture? If you said he didn't wash his hands before touching the box, opening it, and gloving up, then you would be right. He did not lower my risk for an allergic response when he removed the latex glove. Putting on a non-latex glove, he only removed the latex glove, but his failure to wash left residual latex on his hands which was transferred to anything he touched.

I reiterated my request that he wash his hands, but he stood in an apparent daze unable to respond, at which point I got up, left the room, and informed the front desk that I was not taking the test today. As I walked down the hallway I overheard one of the staff ask the tech what happened and his response was, "She was unhappy with my choice of gloves."

Shortly thereafter, I spoke with the doctor who was in charge of the clinic and explained that I would make another appointment and return at a later date. Without hesitation she worked to correct the problem, while using all her people-handling skills to convince me to stay and complete my test. After a few minutes of discussion and the promise that another person, an RN this time, would be the one preparing me for the test, I consented to remain. This particular RN came prepared with non-latex gloves and was well briefed on latex allergy. Thanks to her, my test was uneventful.

It is very frustrating to see how many nurses and other healthcare professionals seem completely ignorant of the impact of latex on the latex-sensitive or allergic person. Once, when working on an assignment, I had to provide a doctor's note to the charge nurse to validate my allergy so that hospital supply management would be given the green light to order non-latex gloves. It appeared to me that the hospital personnel were unaware OSHA (Occupational Safety & Health Administration) has specific standards that apply to latex and healthcare workers; they are Section 5(a)(1) and Section 5(c)(2).

Last year, a nurse tried to convince me that non-latex gloves were only available to nurses who were themselves latex sensitive and that it did not apply to patients. However, in the nurse's defense she did call me later in

the day to apologize. She explained that after I had left, she contacted their facility's infectious disease nurse who then confirmed my statements and educated her about her error in judgment. Not many nurses would have exhibited such a professional demeanor. When I once again had her as my nurse for a testing procedure, I must say she had integrated what she had learned.

I know that most nurses are very cognizant of latex allergy and its potential severity to patients and nurses alike. However, I have also experienced firsthand perfectly competent nurses develop a case of "brain freeze" and slip latex gloves on without first accessing whether or not the patient is latex sensitive.

I know many of you reading this will be prone to exclaim that my experiences are the exception rather than the rule. But I challenge you to a good hard look around and you'll see latex gloves are the glove of choice not only in the healthcare setting, but in nearly every occupation where protective gloves need to be worn. I know that cost is the most commonly referenced reason. I have even seen non-latex gloves kept under lock and key and treated to greater restrictions than the most potent narcotic.

This only goes to reinforce the belief that there is a chasm of difference in price between the two. In reality, it's probably not because latex is cheaper, but because hospitals buy in bulk. What if hospitals only ordered non-latex gloves, and abandoned the use of latex gloves entirely? The glove industry would adapt to meet this need, and according to the laws of supply and demand, the price would drop.

We nurses have an impact on hospital policy. Sometimes that impact may be small in scale, and other times it may be great. I suggest that the next time you find yourself involved in ordering for the unit, floor, or even participating in "a how can our hospital be more efficient?" session, make the recommendation of converting to non-latex glove use. Ordering only non-latex gloves in bulk will drive down the price. Nurses will be protected from developing a life-threatening sensitivity, and our patients won't have to worry about catching their nurse before she puts on those latex gloves. **WN**



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